

KANSAS CRIMINAL JUSTICE COORDINATING COUNCIL

OFFICE OF THE GOVERNOR

GRANTS PROGRAM

LONDON STATE OFFICE BLDG, 900 SW JACKSON, ROOM 304 N, TOPEKA, KS 66612

FAX : (785) 291-3204

GRANT PROJECT NARRATIVE REPORT

Due October 15, 2006, January 15, April 15, and July 15, 2007

The information provided on this report will be used by the Governor's Grants Program Staff to review progress on the funded grant projects. No further monies or other benefits may be paid out under this program unless this report is completed and filed as required by existing laws and regulations. The information in this report will be shared with the U.S. Department of Justice, Bureau of Justice Assistance and the Kansas Criminal Justice Coordinating Council.

1. NAME AND ADDRESS OF SUBGRANTEE ORGANIZATION

2. GRANT PROJECT NUMBER

3. REPORTING PERIOD (MM/DD/YY)

FROM:

TO:

4. GRANT AMOUNT

5. DATE OF REPORT

6. PHONE NUMBER

7. NAME AND TITLE OF AUTHORIZED CERTIFYING OFFICIAL

8. SIGNATURE

9. TARGET AREA FOR THE GRANT PROJECT:

Statewide _____

Region/Multi-Jurisdictional _____

County _____

Municipality _____

Please list the regions or counties served:

10. QUARTERLY STATISTICAL INFORMATION AS IT APPLIES TO THE GRANT PROJECT:

1. Number of investigations

0

1a. Adults

1b. Juveniles

2. Total number of arrests

0

2a. # of possession arrests

2b. # of trafficking arrests

2c. # of domestic violence arrests

2d. # of sexual assault arrests

2e. # of child abuse arrests

2f. # of juvenile arrests

2g. # of other

3. Number of illegal drug labs seized

4. Number of prosecutions

0

4a. Adult

4b. Juvenile adjudication

5. Number of offenders on supervision

0

5a. Adults

5b. Juveniles

6. Number of offenders receiving treatment

0

6a. Adults

6b. Juveniles

7. Number of offenders successfully discharged

0

7a. Adult probation

7b. Juvenile probation

7c. Adult parole

7d. Juvenile parole

7e. Adult community corrections

7f. Juvenile community corrections

7g. Adult treatment

7h. Juvenile treatment

8. Total number of victims served

0

8a. Adults

8b. Children

9. Total number trained

0

9a. Number of law enforcement officers

9b. Other professionals

10. Number of prevention trainings



PLEASE RESPOND TO THE FOLLOWING QUESTIONS. A SEPARATE SHEET OF PAPER MAY BE ATTACHED IF NECESSARY.

11. Describe how the goals and the objectives of the grant project are being met. If this is the final report, explain how the goals and objectives have or have not been met.

12. Please describe any problems that have occurred during the reporting period. If this is the final report, explain how this has impacted the grant project.

13. Attach any notable news articles that may be beneficial to report the grant project's success.

Approved by Office of the Governor:

Date: